

EXHIBIT 1

BURNS LAW FIRM

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September 6, 2022

**VIA US CERTIFIED MAIL
RETURN RECEIPT REQUESTED
and FACSIMILE to 314-539-7894**

EEOC
Robert A. Young Federal Building
1222 Spruce Street
Rm 8.100
St. Louis, MO 63103

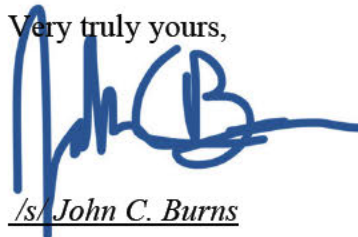
RE: Jamie Akers v. AstraZeneca Pharmaceuticals, LP

To the EEOC:

I represent Jamie Akers in her claims against AstraZeneca Pharmaceuticals, LP. I have enclosed an executed copy of Ms. Akers' charge of discrimination. Please confirm receipt.

Thank you.

Very truly yours,



/s/ John C. Burns

JCB/er

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To:

Agency(ies) Charge No(s):

☐ FEPA☒ EEOC

and EEOC

State or local Agency, if any

Name (Indicate Mr., Ms., Mrs.)

Jamie M. Akers

Home Phone (Incl. Area Code)

(816) 590-7739

Date of Birth

[REDACTED] 1981

Street Address

2216 RedRock Drive Edmond, OK 73003

City, State and ZIP Code

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)

Name

ASTRAZENECA PHARMACEUTICALS, LP

No. Employees, Members

501+

Phone No. (Incl. Area Code)

(855) 393-4056

Street Address

1800 CONCORD PIKE P.O. BOX 15437 WILMINGTON, DE 19850-5437

City, State and ZIP Code

Name

No. Employees, Members

Phone No. (Incl. Area Code)

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)

☒ RACE☒ COLOR☒ SEX☒ RELIGION☐ NATIONAL ORIGIN☒ RETALIATION☒ AGE☒ DISABILITY☒ GENETIC INFORMATION☒ OTHER (Specify) Association with other religious persons

DATE(S) DISCRIMINATION TOOK PLACE

Earliest

January, 2022

Latest

4/29/2022

☒ CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)).

The Particulars Are (If additional space is needed, attach extra sheet(s)):

My name is Jamie Akers I am a 41 year-old white female, and until recently I was a Biologics Sales Specialist for AstraZeneca Pharmaceuticals, LP ("AZ"). I was terminated on April 29, 2022 directly as a result of AZ's illegal discrimination against me on the basis of my religious beliefs, my age, my sex, my race and color, my association with other faithful religious persons, and because I opposed AZ's discriminatory policies. Prior to my termination, I worked for AZ for fifteen (15) years.

In January of 2022, AZ initiated a so-called 100% COVID-19 vaccination policy for its US Division. However, this policy did not in fact require 100% vaccine compliance. On February 10, 2022, AZ informed all employees that they could seek medical and religious accommodations to the vaccination policy. I was informed that if I refused the vaccine because of my religious beliefs, I would be granted an accommodation, which would consist of weekly testing for COVID-19 infection. The stated deadline for submitting a religious accommodation request was February 28, 2022. Notably, beginning in August of 2021, AZ required employees to test weekly for COVID-19 and submit their test results. Between August, 2021 and April 29, 2022, I tested weekly for COVID-19 and submitted the results to AZ.

On or about February 25, 2022, I timely submitted a request for a religious accommodation to AZ's "100%" vaccination policy, and I also enclosed a letter from the Pastor of my Church. On March 31, 2022, AZ informed me they denied my request for accommodation because "you are not qualified for a reasonable accommodation." However, I have a male colleague who is roughly eight (8) years my junior (33) who submitted a substantially similar accommodation request, but was approved. My request for accommodation was based on my fervently held religious beliefs. In submitting my request for accommodation, I violated no policies nor engaged (continued on next page).

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State or Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY
(month, day, year)

RACHAEL SARMIENTO
Notary Public - State of Oklahoma
Commission Number 22001195
My Commission Expires Jan 26, 2026

Date

Charging Party Signature

CHARGE OF DISCRIMINATION

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Charge Presented To:

Agency(ies) Charge No(s):

☐ FEPA☐ EEOC

and EEOC

State or local Agency, if any

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

Jamie Akers - Charge of Discrimination (continued, p.2).

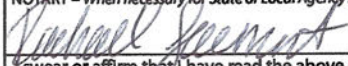
in misconduct. Further, AZ's decision to deny my accommodation was not based on any "undue hardship" to AZ, because the junior colleague, as one example, was exempted from the vaccine and his accommodation required him to test weekly for COVID-19 – as I had previously done for the eight (8) months prior to my termination. I have been an excellent employee for AZ in all my years there, and AZ's discrimination against me is morally and legally wrong.

As a result of the AZ's discrimination and retaliation, I have suffered and continue to suffer adverse actions including discrimination, termination, lost wages, severe emotional distress, anxiety, embarrassment, humiliation, and deprivation of my civil rights. As a remedy, I am seeking compensation for the above damages, including emotional damages, back pay, front pay, punitive damages, attorney's fees, costs, and all further remedies available under the law.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY – When necessary for State or Local Agency Requirements



8/5/22

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY
(month, day, year)

RACHAEL SARMIENTO
Notary Public - State of Oklahoma
Commission Number 22001195
My Commission Expires Jan 26, 2026

8/5/22 

Date

Charging Party Signature

Print Form